2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000010555

Entity Name: ANTIQUES, AUCTIONS AND AUTOS, INC.

FILED Jul 01, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

664 S TAMIAMI TRAIL 49 SOUTH TAMIAMI TRAIL OSPREY, FL 34229 US

Current Mailing Address: New Mailing Address:

664 S TAMIAMI TRAIL 49 SOUTH TAMIAMI TRAIL OSPREY, FL 34229 US OSPREY, FL 34229 US

FEI Number: 59-3495876 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BUCHNER, LONIE

664 S TAMIAMI TRAIL

OSPREY, FL 34229 US

BUCHNER, LONIE L

1735 SOUTH CREEK DR

OSPREY, FL 34229 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LONIE L. BUCHNER 07/01/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete

Name: BUCHNER, NANCY J Address: 664 S TAMIAMI TRAIL City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: BUCHNER, LONIE L
Address: 664 S TAMIAMI TRAIL
City-St-Zip: OSPREY, FL 34229

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition

Name: BUCHNER, NANCY J
Address: 49 SOUTH TAMIAMI TR
City-St-Zip: OSPREY, FL 34229 US

Title: D (X) Change () Addition

Name: BUCHNER, LONIE L Address: 49 SOUTH TAMIAMI TR City-St-Zip: OSPREY, FL 34229 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LONIE L. BUCHNER O/D 07/01/2004